

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10 642 396

FILED DATE

APPLICANT(S)

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		AFTER 3RD AMENDMENT		AFTER 4TH AMENDMENT		AFTER 5TH AMENDMENT	
NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.
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TOTAL NO.		TOTAL DEP.		TOTAL CLAIMS		TOTAL NO.		TOTAL DEP.		TOTAL CLAIMS	
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